

2773
2173



Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | | |
|---|----------------------|------------------------|-------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/517,874 | |
| | Filing Date | March 2, 2000 | |
| | First Named Inventor | Swain W. Porter | |
| | Group Art Unit | 2773 | |
| | Examiner Name | Not yet assigned | |
| Total Number of Pages in This Submission | 17 | Attorney Docket Number | 41003.P013X |

RECEIVED

OCT 11 2001

Technology Center 2100

| ENCLOSURES (check all that apply) | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input checked="" type="checkbox"/> Drawing(s) (11 pages) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input checked="" type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | 1. Return Receipt Postcard |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | 2. Transmittal of Formal Drawings (1 page) |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | TC 2100 CSO STATUS INQUIRY RECEIVED |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | Remarks | OCT 12 2001 |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | Initials: PK |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm or Individual name | Aloysius T.C. AuYeung, Reg. No. 35,432 COLUMBIA IP LAW GROUP, PC |
| Signature | |
| Date | October 4, 2001 |

| CERTIFICATE OF MAILING | |
|--|--------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 10/4/2001 | |
| Typed or printed name | Michelle J. Turner |
| Signature | |
| Date | 10/4/2001 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/17 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

| | |
|----------------------|------------------|
| Application Number | 09/517,874 |
| Filing Date | March 2, 2000 |
| First Named Inventor | Swain W. Porter |
| Examiner Name | Not yet assigned |
| Group Art Unit | 2773 |
| Attorney Docket No. | 41003.P013X |

RECEIVED

OCT 11 2001

Technology Center 2100

| | | | |
|--|--|---|--|
| METHOD OF PAYMENT | | FEE CALCULATION (continued) | |
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: 501569 Deposit Account Name: Columbia IP Law Group, PC <input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | 3. ADDITIONAL FEES | |
| 2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other | | Large Entity Fee (\$) Small Entity Fee (\$) Fee Description Fee Paid | |
| FEE CALCULATION | | | |
| 1. BASIC FILING FEE | | | |
| Large Entity Fee (\$) Small Entity Fee (\$) Fee Description Fee Paid | | | |
| 101 740 201 370 Utility filing fee | | | |
| 106 330 206 165 Design filing fee | | | |
| 107 510 207 255 Plant filing fee | | | |
| 108 740 208 370 Reissue filing fee | | | |
| 114 760 214 80 Provisional filing fee | | | |
| SUBTOTAL (1) (\$) | | | |
| 2. EXTRA CLAIM FEES | | | |
| Total Claims Extra Claims Fee from below Fee Paid | | | |
| Independent Claims -3**= X = | | | |
| Multiple Dependent = | | | |
| Large Entity Fee (\$) Small Entity Fee (\$) Fee Description Fee Paid | | | |
| 103 18 203 9 Claims in Excess of 20 | | | |
| 102 84 202 42 Independent claims in excess of 3 | | | |
| 104 280 204 140 Multiple dependent claim, if not paid | | | |
| 109 84 209 42 ** Reissue independent claims over original patent | | | |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent | | | |
| SUBTOTAL (2) (\$) | | | |
| **or number previously paid, if greater; For Reissues, see above | | | |
| | | Other fee (specify) | |
| | | SUBTOTAL (3) (\$) | |

| | | | |
|-------------------|-----------------------|-----------------------------------|-----------------|
| SUBMITTED BY | | Complete (if applicable) | |
| Name (Print/Type) | Aloysius T.C. AuYeung | Registration No. (Attorney/Agent) | 35,432 |
| Signature | | Telephone | 503-534-2800 |
| | | Date | October 4, 2001 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Attorney's Docket No. 41003.P013X

Patent #8 pay 10-18-01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
RECEIVED

RECEIVED
OCT 11 2001
Technology Center 2100

In re Application for:

OCT 12 2001

Examiner: Not yet assigned

Swain W. Porter

Initials: SP

Art Group: 2773

Application No.: 09/517,874

Filed: March 2, 2000

For: EXCLUSIVE USE DISPLAY
SURFACE AREAS AND
PERSISTENTLY VISIBLE
DISPLAY OF CONTENTS
INCLUDING ADVERTISEMENTS

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed Commissioner for Patents, Washington, DC 20231 on:

Date of Deposit: OCTOBER 4, 2001

Name of Person Mailing: NICHOLE J. TURNER

Signature: [Signature] Date: 10.4.01

Commissioner for Patents
Washington, DC 20231

TRANSMITTAL OF FORMAL DRAWINGS

Dear Sir:

Enclosed herewith for filing in the above-identified U.S. patent application are the formal drawings, Figures 1a, 1b, 1c, 1d, 1e, 1f, 2-3, 4a, 4b, 4c, 4d, 5-7 (submitted on 11 pages).

The Commissioner is hereby authorized to charge shortages or credit overpayments to Deposit Account No. 501569. A Fee Transmittal is enclosed in duplicate for fee processing purposes.

Respectfully submitted,
COLUMBIA IP LAW GROUP, PC

Dated: _____, 2001

Aloysius T.C. AuYeung
Registration No. 35,432

4900 SW Meadows Road, Suite 109
Lake Oswego, Oregon 97035
503-534-2800